

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
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1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WYOMING MEDICAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

P.O. BOX 4009

Check if different than previously reported. (ACC)

CHEYENNE

WY

82003-4009

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

00028415

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - May 20 (M5)
  - Aug 20 (M8)
  - Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)
  - Jun 20 (M6)
  - Sep 20 (M9)
  - Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)
  - Jul 20 (M7)
  - Oct 20 (M10)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12B)
  - Runoff (12B)
  - Convention (12C)
  - Special (12S)

Election on [ ] / [ ] / [ ] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period

07 / 01 / 2012 through 09 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sheila Bush

Signature of Treasurer

*Sheila Bush*

Date

10 / 08 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X  
Rev. 12/2004

12030900514

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003).

Page 2

Write or Type Committee Name

WYOMING MEDICAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 07 ' 01 ' 2012 To: 09 ' 30 ' 2012

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

|   |                |                |
|---|----------------|----------------|
| 6. (a) Cash on Hand<br>January 1, <u>2012</u>   |                | <u>1310220</u> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....   | <u>1472454</u> |                |
| (c) Total Receipts (from Line 19).....  | <u>10000</u>   | <u>260000</u>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....             | <u>1482454</u> | <u>1570220</u> |
| 7. Total Disbursements (from Line 31).....  | <u>345123</u>  | <u>432889</u>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                        | <u>1137331</u> | <u>1137331</u> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  |                |                |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... |                |                |

12030900515

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WYOMING MEDICAL POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

07 ' 01 ' 2012

To:

09 ' 30 ' 2012

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

|       |
|-------|
|       |
| 10000 |
| 10000 |
|       |
|       |

|        |
|--------|
| 50000  |
| 210000 |
| 260000 |
|        |
|        |

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

|       |
|-------|
| 10000 |
|-------|

|        |
|--------|
| 260000 |
|--------|

12. Transfers From Affiliated/Other Party Committees.....

|  |
|--|
|  |
|--|

|  |
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13. All Loans Received.....

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14. Loan Repayments Received.....

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15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

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16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

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17. Other Federal Receipts (Dividends, Interest, etc.).....

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|--|
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18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

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- (b) Levin Funds (from Schedule H5).....

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- (c) Total Transfers (add 18(a) and 18(b))..

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|  |
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19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

|       |
|-------|
| 10000 |
|-------|

|        |
|--------|
| 260000 |
|--------|

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

|       |
|-------|
| 10000 |
|-------|

|        |
|--------|
| 260000 |
|--------|

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

|   |        |        |
|---|--------|--------|
| 21. Operating Expenditures:   |        |        |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                   |        |        |
| (i) Federal Share .....   |        |        |
| (ii) Non-Federal Share .....  |        |        |
| (b) Other Federal Operating Expenditures .....  | 5541   | 13307  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                         | 5541   | 13307  |
| 22. Transfers to Affiliated/Other Party Committees .....  |        | 80000  |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....         |        |        |
| 24. Independent Expenditures (use Schedule E) .....   |        |        |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....                   |        |        |
| 26. Loan Repayments Made .....  |        |        |
| 27. Loans Made .....  |        |        |
| 28. Refunds of Contributions To:  |        |        |
| (a) Individuals/Persons Other Than Political Committees .....                                   |        |        |
| (b) Political Party Committees .....  |        |        |
| (c) Other Political Committees (such as PACs) .....   |        |        |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            |        |        |
| 29. Other Disbursements .....   | 339582 | 339582 |
| 30. Federal Election Activity (2 U.S.C. §431(20))   |        |        |
| (a) Allocated Federal Election Activity (from Schedule H6)                                      |        |        |
| (i) Federal Share .....   |        |        |
| (ii) "Levin" Share .....  |        |        |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            |        |        |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....             |        |        |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..       | 345123 | 432889 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ..... | 345123 | 432889 |

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 10000                         | 260000                            |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 00                            | 00                                |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 10000                         | 260000                            |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 5541                          | 13307                             |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....                | 00                            | 00                                |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 5541                          | 13307                             |

12030900518

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

|   |                                    |   |                                    |                                    |                                   |                                    |             |
|---|------------------------------------|---|------------------------------------|------------------------------------|-----------------------------------|------------------------------------|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  |   |                                    |                                    |                                   |                                    | PAGE 1 OF 3 |
|   | <input type="checkbox"/> 21b<br>27 | <input checked="" type="checkbox"/> 22<br>28a | <input type="checkbox"/> 23<br>28b | <input type="checkbox"/> 24<br>28c | <input type="checkbox"/> 25<br>29 | <input type="checkbox"/> 26<br>30b |             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WYOMING MEDICAL POLITICAL ACTION COMMITTEE**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>WAYNE JOHNSON Campaign</b>  |  | Date of Disbursement<br><b>08 ' 09 ' 2012</b>           |
| Mailing Address<br><b>5502 Canyon Rd</b>  |  | Amount of Each Disbursement this Period<br><b>15000</b> |
| City<br><b>Cheyenne</b>   | State<br><b>WY</b>   |   |
| Zip Code<br><b>82009</b>  |  | Amount of Each Disbursement this Period<br><b>15000</b> |
| Purpose of Disbursement<br><b>Campaign Contribution</b>   | Category/Type<br><b>011</b>  |   |
| Candidate Name<br><b>Wayne H. Johnson</b>   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: <b>WY</b> District: <b>06</b>  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>Stan Cooper Campaign</b>  |  | Date of Disbursement<br><b>08 ' 09 ' 2012</b>           |
| Mailing Address<br><b>417 Agate Street</b>  |  | Amount of Each Disbursement this Period<br><b>25000</b> |
| City<br><b>Kennermer</b>  | State<br><b>WY</b>   |   |
| Zip Code<br><b>83101</b>  |  | Amount of Each Disbursement this Period<br><b>25000</b> |
| Purpose of Disbursement<br><b>Campaign Contribution</b>   | Category/Type<br><b>011</b>  |   |
| Candidate Name<br><b>Stan Cooper</b>  |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: <b>WY</b> District: <b>14</b>  |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>Elaine Harvey for House District #26</b>   |  | Date of Disbursement<br><b>08 ' 09 ' 2012</b>           |
| Mailing Address<br><b>192 Garfield Ave</b>   |  | Amount of Each Disbursement this Period<br><b>25000</b> |
| City<br><b>Lowell</b>  | State<br><b>WY</b>   |   |
| Zip Code<br><b>82431</b>   |  | Amount of Each Disbursement this Period<br><b>25000</b> |
| Purpose of Disbursement<br><b>Campaign Contribution</b>  | Category/Type<br><b>011</b>  |   |
| Candidate Name<br><b>Elaine Harvey</b>   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: <b>WY</b> District: <b>26</b>   |  |   |

|   |              |
|---|--------------|
| SUBTOTAL of Disbursements This Page (optional).....▶      | <b>65000</b> |
| TOTAL This Period (last page this line number only).....▶ |              |

12030900519

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|                              |  |                              |                              |                             |                              |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a           | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

WYOMING MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

|  |  |  |
|--|--|--|
| A. Patrick Bishop Campaign                       |  | Date of Disbursement   |
| Mailing Address<br>1822 Woolwick Ct              |  | 08' 09' 2012   |
| City<br>Casper                                   | State<br>WY  | Zip Code<br>82609  |
| Purpose of Disbursement<br>Campaign Contribution | Category/Type<br>011   | Amount of Each Disbursement this Period<br>500.00  |
| Candidate Name<br>Patrick Bishop                 | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: WY  | District: 35   |  |

|  |  |  |
|--|--|--|
| B. Bob Fecht Campaign                            |  | Date of Disbursement   |
| Mailing Address<br>7610 Cattlemans Dr.           |  | 08' 09' 2012   |
| City<br>Cheyenne                                 | State<br>WY  | Zip Code<br>82009  |
| Purpose of Disbursement<br>Campaign Contribution | Category/Type<br>011   | Amount of Each Disbursement this Period<br>250.00  |
| Candidate Name<br>Bob Fecht                      | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: WY  | District: 42   |  |

|  |  |  |
|--|--|--|
| C. Charles Scott Campaign                        |  | Date of Disbursement   |
| Mailing Address<br>13900 State Hwy 487           |  | 08' 09' 2012   |
| City<br>Casper                                   | State<br>WY  | Zip Code<br>82604  |
| Purpose of Disbursement<br>Campaign Contribution | Category/Type<br>011   | Amount of Each Disbursement this Period<br>1,495.82  |
| Candidate Name<br>Charles Scott                  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: WY  | District: 30   |  |

|   |         |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶      | 2245.82 |
| TOTAL This Period (last page this line number only).....▶ |         |

12030900520

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 3

|                              |  |                              |                              |                             |                              |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a           | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Wyoming Medical Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Friends of Barrasso Campaign

Mailing Address: P.O. Box 52008

City: Casper State: WY Zip Code: 82605

Purpose of Disbursement: Campaign Contribution

Candidate Name: Senator John Barrasso

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: WY District:

Date of Disbursement

09 / 18 / 2012

Amount of Each Disbursement this Period

500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

500.00  
3,395.82

12030900521

12030900522

Fax Number (307) 632-1973

E-mail Address [mcowley@wyomed.org](mailto:mcowley@wyomed.org)

Select the appropriate FECFile User Manual:

Candidate Committees (Authorized Committees)

PAC, Party, and Other Committees (Unauthorized Committees)

**Federal Election Commission**

**999 E Street, NW  
Washington, DC 20463**

**Office #: 202-694-1293**

**Fax #: 202-219-0674**

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*10/10/12*

Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JMLW*  
PREPARER

*10/11/12*  
DATE PREPARED

12030900523